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# **Request for Proposal**

## **DATA ENTRY SERVICES**

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**County of San Bernardino  
Information Services Department  
670 East Gilbert Street  
San Bernardino, California 92415-0915  
Phone: 909 388-5500  
FAX: 909 388-5555  
RFP: No. ISD 03-04**

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## **I. INTRODUCTION**

### **A. Purpose**

The County of San Bernardino, hereafter referred to as the "County", is seeking proposals from interested and qualified organizations and firms to provide data entry services.

### **B. Minimum Proposer Requirements**

All Proposers **must**:

1. Have no record of unsatisfactory performance. Proposers who are or have been seriously deficient in current or recent contract performance, in the absence of circumstances properly beyond the control of the Proposer, shall be presumed to be unable to meet this requirement.
2. Have the ability to maintain adequate files and records and meet statistical reporting requirements.
3. Have the administrative and fiscal capability to provide and manage the proposed services and to ensure an adequate audit trail.
4. Customer References – All Proposers must provide references of a minimum of two (2) other customers, involving the Proposer's delivery of services that demonstrate the ability of the Proposer to complete similar data entry requirements outlined in the scope of work (Attachment B). All references must have names, titles, and phone numbers.
5. Meet other presentation and participation requirements listed in this Request for Proposal (RFP).

### **C. Correspondence**

All correspondence, including proposal, is to be submitted to:

County of San Bernardino  
Information Services Department  
670 East Gilbert Street, 2<sup>nd</sup> floor  
San Bernardino, CA 92415-0915  
Attn: Angela Hillman, RFP # 03-04  
Fax number (909) 388-5555  
Email: [ahillman@isd.sbcounty.gov](mailto:ahillman@isd.sbcounty.gov)

### **D. Questions**

Questions regarding the contents of this proposal must be submitted in writing (either via email or facsimile) and directed to the individual listed above. Any questions responded to by the County will be answered and disseminated to all qualified Proposers.

Questions regarding the RFP and/or process must be submitted on or before 5:00 p.m. (Pacific Time) on July 22, 2003.

**E. Proposal Submission Deadline**

All proposals must be received at the address listed in Section I, Paragraph C, no later than 5:00 p.m. (Pacific Time) on August 1, 2003. Facsimile or electronically transmitted proposals will not be accepted since they do not contain original signatures. Postmarks will not be accepted in lieu of actual receipt. Late or incomplete proposals will not be opened and, therefore, not considered.

**F. Admonition to Vendors**

As of the issuance of this RFP, Vendors are specifically directed not to contact County personnel for meetings, conferences or technical discussions related to this RFP. Failure to adhere to this policy may result in disqualification of the Vendor. All questions regarding this RFP can be presented in writing as indicated in Paragraph D.

**G. Term**

The term of the contract awarded will be for a period not to exceed 3 years.

**II. PROPOSAL TIMELINE**

- |    |   |  |
|----|---|--|
| A. | Release of RFP  | <b>July 8, 2003</b>  |
| B. | Deadline for Questions                                | <b>July 22, 2003</b>   |
| C. | Deadline for Receipt of RFP Response                  | <b>August 1, 2003</b><br><b>5:00 pm (Pacific Time)</b>                 |
| D. | Send Intent to Award Letters to Proposers (Tentative) | <b>August 2003</b>   |
| E. | Deadline for Appeals                                  | <b>Ten (10) calendar days after receipt of Intent to Award Letters</b> |
| F. | Date for Awarding of Contract(s) (Tentative)          | <b>September 2003</b>  |

**III. PROPOSAL CONDITIONS**

**A. Contingencies**

Funding for these services is contingent upon the availability of funding to the County. This RFP does not commit the County to award a Contract. The County reserves the right to accept or reject any or all proposals if the County determines it is in the best interest of the County to do so. The County will notify all Proposers, in writing, if the County rejects all proposals.

**B. Modifications**

The County reserves the right to issue addenda or amendments to this RFP.

**C. Proposal Submission**

To be considered, all proposals must be submitted in the manner set forth in this proposal. It is the Proposer's responsibility to ensure that its proposal arrives on or before the specified time. All proposals and materials submitted become the property of the County.

**D. Incurred Costs**

This RFP process does not commit the County to pay any costs incurred in the preparation of a proposal in response to this request, and Proposer agrees that all costs incurred in developing this proposal are the Proposer's responsibility.

**E. Inaccuracies or Misrepresentations**

If in the course of the RFP process or in the administration of a resulting Contract, the County determines that Contractor has made a material misstatement or misrepresentation or that materially inaccurate information has been provided to the County, the Contractor may be terminated from the RFP process or in the event a Contract has been awarded, the Contract may be immediately terminated.

In the event of a termination under this provision, the County is entitled to pursue any available legal remedies.

**F. Negotiations**

The County may require the potential Contractor(s) selected to participate in negotiations, and to submit revisions to pricing, technical information, and or other items from their proposals as may result from negotiations.

**G. Final Authority**

The final authority to award Contracts rests solely with the County of San Bernardino Board of Supervisors.

**H. Disclosure of Criminal and Civil Proceedings**

The County reserves the right to request the information described herein from the Vendor selected for contract award. Failure to provide the information may result in disqualification from the selection process and no award of contract to the Vendor. The County also reserves the right to obtain the requested information by way of a background check performed by an investigation firm. The selected Vendor also may be requested to provide information to clarify initial responses. Negative information provided or discovered may result in disqualification from the selection process and no award of contract.

The selected Vendor may be asked to disclose whether the firm, or any of its partners, principals, members, associates or key employees (as that term is defined herein), within the last ten years, has been indicted on or had charges brought against it or them (if still

pending) or convicted of any crime or offense arising directly or indirectly from the conduct of the firm's business, or whether the firm, or any of its partners, principals, members, associates or key employees, has within the last ten years, been indicted on or had charges brought against it or them (if still pending) or convicted of any crime or offense involving financial misconduct or fraud. If the response is affirmative, the Vendor will be asked to describe any such indictments or charges (and the status thereof), convictions and the surrounding circumstances in detail.

In addition, the selected Vendor may be asked to disclose whether the firm, or any of its partners, principals, members, associates or key employees, within the last ten years, has been the subject of legal proceedings as defined herein arising directly from the provision of services by the firm or those individuals. "Legal proceedings" means any civil action filed in a court of competent jurisdiction, or any matters filed by an administrative regulatory body with jurisdiction over the firm or the individuals. If the response is affirmative, the Vendor will be asked to describe any such legal proceedings (and the status and conviction thereof) and the surrounding circumstances in detail.

For purposes of this provision "key employees" includes any individuals providing direct service to the County. "Key employees" do not include clerical personnel providing service at the firm's offices or locations.

#### **I. Acceptance or Rejection of Proposals**

Proposals shall remain open, valid, and subject to acceptance anytime within 180 days after proposal opening.

### **IV. SCOPE OF WORK**

#### **A. Background**

The County of San Bernardino encompasses 20,160 square miles, the largest county in the continental United States. It borders Los Angeles, Riverside, Orange, Inyo and Kern Counties and the States of Arizona and Nevada.

The County's Information Services Department (ISD) is responsible for providing a variety of professional Information Technology and data communication services to all County departments, special districts and other federal, state and local government agencies. ISD is seeking the services of a qualified contractor to provide professional and specialized data entry services, to include keying and verifying of data, in formats specified, in quantities ordered, at times needed, transmitted, pickup and delivery and rates agreed upon.

## **B. Requirements**

### **1. Source Documents**

- a. County will contact Contractor when data entry services are needed and will provide Contractor with source documents and data entry instructions to perform data entry services.
- b. Source documents provided shall remain the property of County and Contractor shall be liable for source documents while in Contractor's possession. Contractor will provide access to source documents supplied by County to authorized County personnel during Contractor's regular business hours. Contractor shall return all source documents to County upon completion of each data entry service request.
- c. Source documents used by Contractor to provide data entry services shall be considered confidential and Contractor shall maintain confidentiality of the source documents at all times. Information contained in the source documents shall not be released to any other party without written consent from County and shall be kept in a locked room or safe when unsupervised. Violation of the confidentiality of data may result in immediate termination of Contract and possible legal action taken against Contractor.

### **2. Processed Records Transmission**

- a. Contractor shall provide data entry results with IBM compatible file transmission at a minimum of 56 kbps. In case of emergency where transmission of data is not possible, other media such as a magnetic tape containing data, preferably an IBM 3490 (36 Track)/9840 (3590 Track), DVD or CD-ROM, will be delivered to ISD. All expense in connection with setting up for and performing file transmission shall be borne by Contractor(s) and included in Contractor's prices.

### **3. Records Volume and Rate**

- a. County is unable to guarantee Contractor any number of records per year; however, the following historical data is provided for the following jobs:

<b>Dept / Job</b>	<b>Volume</b>	<b>Data Transmission Deadlines</b>	<b>Source Doc Turnaround</b>	<b>Pickup/Delivery Location</b>
<b>Public Works - Trans / Flood Control / Surveyor:</b>				<i>DAILY</i>
HI015 - TCD INV SURVEY DOCUMENT	1,500-2,500 records monthly	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PP200 - Classification File Updates	1,500-2,500 records monthly	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415



PP300 - Department File Update	200-400 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PP400 - Personnel File Update	200-400 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PW925 - Surveyors Index	300-450 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PW949 - Surveyors Index Headers	50 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
Motor Pool Headers	50 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
Heavy Equip	50 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PW960 - Weekly Labor Reports	16,000-17,500 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PW965 - Motor Pool Equip	2,500-3,500 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PW970 - Regular Equip	4,000-4,500 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PW990 - Road Material (Stock Purchase Pickup Order)	1,500-2,000 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
<b>Regional Parks:</b>				<i>On-Request Scheduled</i>
RG200 - Comm Cult Res Cost Ctr Request for Transfers	25-50 records per month	6pm	Next Day	777 East Rialto Ave San Bernardino, CA 92415
<b>ACR - Payroll:</b>				<i>Bi-weekly On-request</i>
HPCAP- COUNTY PAYROLL <i>See Attachment D for current record and layout description.</i>	150,000 – 250,000 records monthly	Monday at 2:00am Tuesday at 10:00 pm	Next Day	222 West Hospitality Road – San Bernardino, CA 92415 4 <sup>th</sup> Floor
HPPUIC - UNEMPLOYMENT INSURANCE CLAIMS	400 – 500 records quarterly	6pm	Next Day	157 West 5 <sup>th</sup> ST – San Bernardino, CA 92415 1st Floor
<b>Motorpool:</b>				<i>On-Request</i>
MP700 - SHERRIF MASTER UPDATE LIST	180-200 records every 2 months	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
MONTHLY MILEAGE REPORT	180-200 records every 2 months	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415

PW900 - Motor Pool - Dorothy 387-7853	2,000 – 2,500 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
PW905 - Cost Center Updates, Cost Center Transfers	750-800 records per month	6pm	Next Day	825 E. Third Street San Bernardino, CA 92415
<b>Public Health:</b>				<i>On-Request</i>
PH400 - DEATH CERTIFICATES	2,500-3,500 per month	6pm	Next Day	351 N. Mt View Ave San Bernardino, CA 92415 Ste 102
<b>Assessor:</b>				<i>On-Request</i>
PSSUB - (NPP875) Subdivision Index - Assessor (once a year)	1,200-1,500 records per year	6pm	Next Day	172 W. Third Street San Bernardino, CA 92415 – 4th Floor
<b>Facilities Mgt:</b>				<i>On-Request Scheduled</i>
RP240 - Utility Bills - Facilities Mgmt	1,100-1,500 records per month	6pm	Next Day	200 South Lena Road San Bernardino, CA 92415
RP260 - Utility Billing Company	25-50 records per month		Next Day	200 South Lena Road San Bernardino, CA 92415
RP508 - Facility Management - Mgmt Material, Equipments, Labor	2,500-3,000 records per month	6pm	Next Day	200 South Lena Road San Bernardino, CA 92415
<b>HSS:</b>				<i>DAILY</i>
WDUP1 - Welfare <i>See Attachment D for current record and layout description.</i>	985,000-1,500,000 records per month	7:30pm	Next Day	825. East Hospitality Lane – San Bernardino. CA 92415 – 1 <sup>st</sup> Floor
WDMSW - DPSS Monthly Suspended Warrants	500-650 records monthly	6pm	Next Day	825. East Hospitality lane – San Bernardino. CA 92415 – 1 <sup>st</sup> Floor
WTPUP - 278 Welfare Training Documents <i>This job is done on request – usually quarterly. This job has not been completed for one year – Program will commence soon</i>	5,800-6,000 records per year	6pm	Next Day	504 N Mountain View San Bernardino. CA 92415
<b>Tax Collector:</b>				<i>DAILY On-Request</i>
TRCAP - Tax Office - TR804 Party of Interest -	15,000-20,000 per year – one time	Pre-Scheduled	Next Day	172 W. Third Street San Bernardino, CA 92415 – 1st Floor
TR910 Returned Tax Bills	25,000-30,000 records quarterly	6pm	Next Day	172 W. Third Street San Bernardino, CA 92415 – 1st Floor

TZCAP – Treasurer	4,000-5,000 records per month	4pm Mon-Fri	Pick up at 2PM – Deliver 4PM Same Day Mon- Fri	172 W. Third Street San Bernardino, CA 92415 – 1st Floor
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4. Quality Control

b. Quality Control problems will be identified to the Contractor(s) in writing.

c. Errors

- (1) The error rate shall not exceed .4% per month of total documents keyed (i.e. .4% of 1,000 documents equals four documents). A penalty shall be imposed of 1% of the total monthly invoice for each .1% above the error threshold percentage (i.e. and error rate of .5% equals a 1% penalty).
- (2) The cost of all programmer's and operational time shall be refunded to the County when reruns or repairs result from errors caused by the Contractor.
- (3) Unresolved and/or repetitive Quality Control problems (loss of document, duplicate transmission, improperly keyed data, omitted data, excessive error rates, etc.) will place the Contractor's contract in jeopardy. The County reserves the rights to terminate any contract due to Quality Control problems upon five (5) days written notice.
- (4) County will perform quality control checks periodically, and especially when Contractor changes software or hardware technology.

**C. Additional Requirements**

1. Contractor shall be responsible for producing all of their formats and keeping them up to date, based upon Data Entry Instructions provided by County.
2. The Contractor is responsible for reasonable planning and coordination with the County when significant non-maintenance hardware/software upgrades are being considered.
3. Contractor is responsible for managing the workload requirements of each job to avoid the use of overtime. It is the responsibility of the Contractor for any overtime requirements to its employees.
4. Contractor shall prepare a written plan for the transition of work in process from the current vendor, in the event the current vendor is not selected.
5. Contractor will document and share with the county a plan for providing a means for the recovery of data and continuity of deliverables should the Contractor's operations become non-operational.
6. County requires periodic on-site inspection of Contractor facilities, equipment and data entry operation.
7. All work shall be performed at the Contractor's facility.

## **V. PROPOSAL SUBMISSION**

### **A. General**

1. All interested and qualified Proposers are invited to submit a proposal for consideration. Submission of a proposal indicates that the Proposer has read and understands the entire RFP, to include all appendixes, attachments, exhibits, schedules, and addendum (as applicable) and all concerns regarding the RFP have been satisfied.
2. Proposals must be submitted in the format described below. Proposals are to be prepared in such a way as to provide a straightforward, concise description of capabilities to satisfy the requirements of this RFP. Expensive bindings, colored displays, promotional materials, etc., are neither necessary nor desired. Emphasis should be concentrated on conformance to the RFP instructions, responsiveness to the RFP requirements, and on completeness and clarity of content.
3. Proposals must be completed in all respects as required in this section. A proposal may not be considered if it is conditional or incomplete.
4. All proposals and materials submitted become property of the County. All proposals received are subject to the "California Public Records Act."
5. Proposals must be verified before submission as they cannot be withdrawn, or corrected after being opened. The County will not be responsible for errors, or omissions on the part of bidders in making up their proposals. A responsible officer or employee must sign proposals.
6. The County reserves the right to reject any and all proposals or portions of proposal or alternates received by reasons of this request, to negotiate separately with any source whatsoever in any manner necessary to serve its interests, and may waive any informality or immaterial irregularities in a proposal.
7. Proposals submitted either by an employee or commercial delivery service may be delivered to the address listed in Section I, Paragraph C, only between the hours of 8:00 a.m. and 5:00 p.m., Mondays through Friday, excluding holidays observed by the County. Proposers are responsible for informing any commercial delivery service, if used, of all delivery requirements, and for ensuring that the address information appears on the outer wrapper or envelope used by such service.

## **B. Technical**

1. Provide a summary of your firm's background and specific experience on similar projects including the specific nature of the work, for whom the work was done, duration of the contract, size of jobs, and turn around requirements.
2. Provide a description and configuration of the equipment that will be used for work being proposed.
3. Provide a brief synopsis of the Proposer's understanding of the County's needs and how the Proposer plans to meet those needs.
4. Provide your company's Organizational Financial Report for the last two (2) years.
5. Provide an explanation of any assumptions and/or constraints used in developing the proposal.
6. Provide cost per record for each job covered in this RFP in Attachment C, assuming all fields are both keyed and verified (Per record cost should be shown at no less than one tenth of a cent, i.e. \$.001). Cost summary should include all costs (excluding taxes).

## **C. Proposal Presentation Instructions**

1. All proposals must be submitted on 8 ½ x 11 paper, neatly typed, double-sided on recycled paper, with normal (1-inch) margins and single-spaced. Typeface must be no more than 12 characters per inch. Each page, including attachments, must be clearly and consecutively numbered at the bottom center of each page.
2. One (1) original and six (6) copies, total of seven (7), of the complete proposal must be received by the deadline for receipt of proposal specified in Section I, Paragraph E (Proposal Submission Deadline). The original and all copies must be in a sealed envelope or container stating on the outside: Proposer Name, Address, Telephone Number, RFP number, RFP Title, and Proposal due date.
3. Cover Page and Statement of Certification - Attachment A is to be used as the cover page for the proposal. These forms must be fully completed and signed by an authorized officer of the Proposer.
4. Table of Contents - All pages of the proposal, including the enclosures, must be clearly and consecutively numbered and correspond to the Table of Contents
5. References - Provide names, addresses and telephone numbers of at least two references that have been served by your firm in a capacity similar to that described

in Section IV, Scope of Work. This information must be included on Attachment B, References and submitted as part of the proposal.

6. Proposal Description - Provide a detailed description of the proposal being made including a discussion of all items listed in Section IV, Scope of Work, including a tentative approach to be used, and items listed above in (B) Technical.
7. Employment of Former County Officials - Provide information on former County of San Bernardino administrative officials (as defined below) who are employed by or represent your business. The information provided must include a list of former County administrative officials who terminated County employment within the last five years and who are now officers, principals, partners, associates or members of the business. Should also include the employment and/or representative capacity and the dates these individuals began employment with or representation of your business. For purposes of this section, "County administrative official" is defined as a member of the Board of Supervisors or such officer's staff, County Administrative Officer or member of such officer's staff, County department or group head, assistant department or group head, or any employee in the Exempt Group, Management Unit or Safety Management Unit. Failure to provide this information may result in the response to the request for proposal being deemed non-responsive.
8. Insurance - Provide evidence of ability to insure as stated in Section VIII, Paragraph B, Indemnification and Insurance Requirements.
9. Licenses, Permits and Certifications - Provide copies of all licenses, permits and certifications as required.

## **VI. PROPOSAL EVALUATION AND SELECTION**

### **A. Evaluation Process**

All proposals will be subject to a standard review process developed by the County. A primary consideration shall be the effectiveness of the agency or organization in the delivery of comparable or related services based on demonstrated performance.

### **B. Evaluation Criteria**

1. Initial Review - All proposals will be initially evaluated to determine if they meet the following minimum requirements:
  - a. The proposal must be complete, in the required format, and be in compliance with all the requirements of this RFP.
  - b. Prospective contractors must meet the requirements as stated in the Minimum Proposer Requirements as outlined in Section I, Paragraph B.

Failure to meet all of these requirements may result in a rejected proposal. No proposal shall be rejected, however, if it contains a minor irregularity, defect or

variation if the irregularity, defect or variation is considered by the County to be immaterial or inconsequential. In such cases the Proposer will be notified of the deficiency in the proposal and given an opportunity to correct the irregularity, defect or variation or the County may elect to waive the deficiency and accept the proposal.

2. Evaluation - Proposals meeting the above requirements will be evaluated on the basis of the following criteria (not in weighted order):
  - a. Quality of services and time frames previously provided.
  - b. Size and scope of previous projects.
  - c. Reference verification.
  - d. Financial stability based upon last two years' annual financial statements.
  - e. Cost.
  - f. Performance Quality Evaluation (Tentative)

Selection will be based on determination of which proposals meet the requirements of the RFP and best meet the needs of the County at a fair and reasonable price.

#### **C. Contract Award**

Contract(s) will be awarded based on a competitive selection of proposals received.

#### **D. Disputes Relating to Proposal Process and Award**

In the event a dispute arises concerning the proposal process prior to the award of the contract, the party wishing resolution of the dispute shall submit a request in writing to the Chief Information Officer (CIO), within ten (10) calendar days of notification of non-selection. Failure to do so waives any objection.

Grounds for an appeal is that the County failed to follow the selection procedures and adhere to requirements specified in the RFP or any addenda or amendments; there has been a violation of conflict of interest as provided by California Government Code Section 87100 et seq.; or violation of State or Federal law. Appeals will not be accepted on any other grounds. The County will consider only those specific issues addressed in the written appeal.

The decision of the CIO shall be final with respect to matters of fact.

All inquiries must be submitted to:

Leyden L. Hahn, Chief Information Officer  
County of San Bernardino  
Information Services Department  
670 East Gilbert Street  
San Bernardino, CA 92415-0915  
Attn: RFP # 03-04

**E. Final Approval**

Any Contract resulting from this RFP will be awarded by final approval of the San Bernardino County Board of Supervisors.

**VII. ADMINISTRATIVE REQUIREMENTS**

**A. Contractor Staffing Requirements – Authority**

The Contractor shall designate a representative who will have complete authority to act on the Contractor's behalf. An alternative representative may be designated as well.

**B. Invoices**

Invoices will be mailed to:

County of San Bernardino  
Information Services Department  
670 East Gilbert Street  
San Bernardino, CA 92415-0915  
Attn: Fiscal Services

**VIII. CONTRACT REQUIREMENTS**

The selected Proposer will be required to enter into a written contract that contains the provisions set forth in this Section VIII.

**A. General**

1. Representation of the County

In the performance of the Contract, Contractor, its agents and employees, shall act in an independent capacity and not as officers, employees, or agents of the County of San Bernardino.

2. Vendor Primary Contact

The Contractor will designate an individual to serve as the primary point of contact for the Contract. Contractor or designee must respond to County inquiries within two (2) business days. Contractor shall not change the primary contact without written acknowledgement to the County.

3. Change of Address

Contractor shall notify the County in writing, of any change in mailing address within ten (10) business days of the change.



4. Subcontracting

Contractor agrees not to enter into any subcontracting agreements for work contemplated under the Contract without first obtaining written approval from the County. Any subcontracting shall be subject to the same terms and conditions as Contractor. Contractor shall be fully responsible for the performance and payments of any subcontractor's contract.

5. Contract Assignability

Without the prior written consent of the County, the Contract is not assignable by Contractor either in whole or in part.

6. Labor Laws

Contractor shall strictly adhere to the applicable provisions of the Labor Code regarding the employment of apprentices; minimum wages; travel and subsistence pay; retention and inspection of payroll records; workers compensation; payment of wages. The Contractor shall forfeit to the County the penalties prescribed in the Labor Code for violations.

7. Agreement Amendments

Contractor agrees any alterations, variations, modifications, or waivers of the provisions of the Contract, shall be valid only when reduced to writing, executed and attached to the original Contract and approved by the required persons.

8. Termination for Convenience

The County for its convenience may terminate this Contract in whole or in part upon thirty (30) calendar day's written notice. If such termination is effected, an equitable adjustment in the price provided for in this Contract shall be made. Such adjustment shall provide for payment to the Contractor for services rendered and expenses incurred prior to the effective date of termination. Upon receipt of termination notice Contractor shall promptly discontinue services unless the notice directs otherwise. Contractor shall deliver promptly to County and transfer title (if necessary) all completed work, and work in progress, including drafts, documents, plans, forms, data, products, graphics, computer programs and reports.

9. Attorney Fees and Costs

If any legal action is instituted to enforce any party's rights hereunder, each party shall bear its own costs and attorneys' fees, regardless of who is the prevailing party. This paragraph shall not apply to those costs and attorneys' fees directly arising from a third-party legal action against a party hereto and payable under Paragraph B.1 Indemnification.

10. Venue

The venue of any action or claim brought by any party to this Contract will be the Superior Court of California, County of San Bernardino, San Bernardino District. Each party hereby waives any law or rule of the court, which would allow them to request or demand a change of venue. If any action or claim concerning this Contract is brought by any third-party and filed in another venue, the parties hereto agree to use their best efforts to obtain a change of venue to San Bernardino County.

11. Jury Trial Waiver

Contractor and County hereby waive their respective rights to trial, by jury for any cause of action, claim, counterclaim, or cross-complaint in any action, proceeding, and/or hearing brought by either Contractor against County or County against Contractor on any matter arising out of, or in any way connected with this Contract, the relationship of Contractor and County, or any claim of injury or damage, or the enforcement of any remedy under any law, statute, or regulation, emergency or otherwise, now or hereafter in effect.

12. Licenses and Permits

Contractor shall ensure that it has all necessary licenses and permits required by the laws of Federal, State, County, and municipal laws, ordinances, rules and regulations. The Contractor shall maintain these licenses and permits in effect for the duration of this Contract. Contractor will notify County immediately of loss or suspension of any such licenses and permits. Failure to maintain a required license or permit may result in immediate termination of this Contract.

13. Notification Regarding Performance

In the event of a problem or potential problem that could impact the quality or quantity of work, services, or the level of performance under this Contract, the Contractor shall notify the County within one (1) working day, in writing and by telephone.

14. Conflict of Interest

Contractor shall make all reasonable efforts to ensure that no County officer or employee, whose position in the County enables him/her to influence any award of this contract or any competing offer, shall have any direct or indirect financial

interest resulting from the award of this contract or shall have any relationship to the Contractor or officer or employee of the Contractor.

15. Improper Consideration

Contractor shall not offer (either directly or through an intermediary) any improper consideration such as, but not limited to, cash, discounts, service, the provision of travel or entertainment, or any items of value to any officer, employee or agent of the County in an attempt to secure favorable treatment regarding this Contract.

The County, by written notice, may immediately terminate any Contract if it determines that any improper consideration as described in the preceding paragraph was offered to any officer, employee or agent of the County with respect to the proposal and award process. This prohibition shall apply to any amendment, extension or evaluation process once a Contract has been awarded.

Contractor shall immediately report any attempt by a County officer, employee or agent to solicit (either directly or through an intermediary) improper consideration from Contractor. The report shall be made to the supervisor or manager charged with supervision of the employee or to the County Administrative Office. In the event of a termination under this provision, the County is entitled to pursue any available legal remedies.

16. Employment of Former County Officials

Contractor agrees to provide or has already provided information on former County of San Bernardino administrative officials (as defined below) who are employed by or represent Contractor. The information provided includes a list of former county administrative officials who terminated county employment within the last five years and who are now officers, principals, partners, associates or members of the business. The information also includes the employment with or representation of vendor. For purposes of this provision, "County administrative official" is defined as a member of the Board of Supervisors or such officer's staff, County Administrative Officer or member of such officer's staff, county department or group head, assistant department or group head, or any employee in the Exempt Group, Management Unit or Safety Management Unit.

17. Copyright

County shall have a royalty-free, non-exclusive and irrevocable license to publish, disclose, copy, translate, and otherwise use, copyright or patent, now and hereafter, all reports, studies, information, data, statistics, forms, plans, and any other materials or properties developed under this Contract including those covered by

copyright, and reserves the right to authorize others to use or reproduce such material. All such materials developed under the terms of this Contract shall acknowledge San Bernardino County as the funding agency and Contractor as the creator of the publication. No such materials or properties produced in whole or in part under this Contract shall be subject to private use, copyright or patent right by Contractor in the United States or in any other country without the express written consent of County. Copies of all educational and training materials, curricula, audio/visual aids, printed material, and periodicals, assembled pursuant to this Contract must be filed with County prior to publication. Contractor shall receive written permission from County prior to publication of said training materials.

18. Records

The Contractor shall make available and furnish said records to the County when requested.

19. Recycled Paper Products

The County has adopted a recycled product purchasing standards policy (11-10), which requires Contractors to use recycled paper for proposals and for any printed or photocopied material created as a result of a contract with the County. The policy also requires Contractors to use both sides of paper sheets for reports submitted to the County whenever practicable.

20. Ownership of Documents

All documents, data, products, graphics, computer programs and reports prepared by Contractor pursuant to this Contract shall be considered property of the County upon payment for services. All such items shall be delivered to County at the completion of work under this Contract, subject to the requirements of Section VIII, Paragraph A.8 (Termination for Convenience). The Contractor is prohibited from selling or in any way distributing any index data or any images resulting from this proposal process and the resultant contract.

21. Release of Information

No news releases, advertisements, public announcements or photographs arising out of this Contract or Contractor's relationship with County may be made or used without prior written approval of the County.

## 22. California Public Records Act

All information submitted in the proposal or in response to request for additional information is subject to disclosure under the provisions of the California Public Records Act, Government Code Section 6250 and following. Responses may contain financial or other data that constitutes a trade secret. To protect such data from disclosure, Contractor should specifically identify the pages that contain confidential information by properly marking all applicable pages.

### **B. Indemnification and Insurance Requirements**

#### 1. Indemnification

The Contractor agrees to indemnify, defend and hold harmless the County and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages and/or liability arising from Contractor's acts, errors or omissions of any person and for any costs or expenses incurred by the County on account of any claim thereof, except where such indemnification is prohibited by law.

#### 2. Insurance Coverage

Without in any way affecting the indemnity herein provided and in addition thereto, the Contractor shall secure and maintain throughout the Contract the following types of insurance with limits as shown:

- a. Workers' Compensation - A program of Workers' Compensation insurance or a State-approved Self-Insurance Program in an amount and form to meet all applicable requirements of the Labor Code of the State of California, including Employer's Liability with \$250,000 limits, covering all persons providing services on behalf of the Contractor and all risks to such persons under this Contract.

If Contractor has no employees, it may certify or warrant to County that it does not currently have any employees or individuals who are defined as "employees" under the Labor Code and the requirement for Workers' Compensation coverage will be waived by the County's Risk Manager.

With respect to Contractors that are non-profit corporations organized under California or Federal law, volunteers for such entities are required to be covered by Workers' Compensation insurance. If the County's Risk Manager determines that there is no reasonably priced coverage for volunteers, evidence of participation in a volunteer insurance program may be substituted.

- b. Comprehensive General and Automobile Liability Insurance - This coverage to include contractual coverage and automobile liability coverage for owned, hired and non-owned vehicles. The policy shall have combined single limits for bodily injury and property damage of not less than one million dollars (\$1,000,000).

- c. Errors and Omission Liability Insurance - Combined single limits of \$1,000,000 for bodily injury and property damage and \$3,000,000 in the aggregate or
- d. Professional Liability Insurance - Professional liability insurance with limits of at least \$1,000,000 per claim or occurrence.

3. Additional Named Insured

All policies, except for the Workers' Compensation, Errors and Omissions and Professional Liability policies shall contain additional endorsements naming the County and its officers, employees, agents and volunteers as additional named insured with respect to liabilities arising out of the performance of services hereunder.

4. Waiver of Subrogation Rights

Except for the Errors and Omissions Liability and Professional Liability, Contractor shall require the carriers of the above-required coverages to waive all rights of subrogation against the County, its officers, employees, agents, volunteers, Contractors, and subcontractor.

5. Policies Primary and Non-Contributory

All policies required above are to be primary and non-contributory with any insurance or self-insurance programs carried or administered by the County.

6. Proof of Coverage

The Contractor shall immediately furnish certificates of insurance to ISD evidencing the insurance coverage, including the endorsements above required, prior to the commencement of performance of services hereunder, which certificates shall provide that such insurance shall not be terminated or expire without thirty (30) days written notice to ISD. Contractor shall maintain such insurance from the time Contractor commences performance of services hereunder until the completion of such services. Within sixty (60) days of the commencement of this Contract, the Contractor shall furnish certified copies of the policies and all endorsements.

7. Insurance Review

The above insurance requirements are subject to periodic review by the County. The County's Risk Manager is authorized, but not required, to reduce or waive any of the above insurance requirements whenever the Risk Manager determines that any of the above insurance is not available, is unreasonably priced, or is not needed to protect the interests of the County. In addition, if the Risk Manager determines that heretofore, unreasonably priced or unavailable types of insurance coverage or coverage limits become reasonably priced or available, the Risk Manager is authorized but not required, to change the above insurance requirements, to require additional types of insurance coverage or higher coverage limits, provided that any such change is reasonable in light of past claims against the County, inflation, or any other item reasonably related to the County's risk.

Any such reduction or waiver for the entire term of the Contract and any change requiring additional types of insurance coverage or higher coverage limits must be made by amendment to this Contract. Contractor agrees to execute any such amendment within thirty (30) days of receipt.

8. Failure to Procure/Show Proof of Insurance

Failure on the part of any Contractor to procure or maintain the required insurance shall be considered a material breach of contract upon which the County may immediately terminate this Contract or, at its discretion, procure or renew such insurance and pay any and all premiums in connection therewith, and all monies so paid by the County shall be repaid by the contractor to the County upon demand or the County may offset the premiums against any monies due to the Contractor from the County.

**C. Right to Monitor and Audit**

1. Right to Monitor

County or any subdivision or appointee, thereof, and the State of California or any subdivision or appointee thereof, including the Auditor General, shall have absolute right to review and audit all records, books, papers, documents, corporate minutes, and other pertinent items as requested, and shall have absolute right to monitor the performance of Contractor in the delivery of services provided under this Contract. Contractor shall give full cooperation, in any auditing or monitoring conducted.

Contractor shall cooperate with the County in the implementation, monitoring and evaluation of this Contract and comply with any and all reporting requirements established by the County.

2. Availability of Records

All records pertaining to services delivered and all fiscal, statistical and management books and records shall be available for examination and audit by County, Federal, and State representatives for a period of three years after final payment under the Contract or until all pending County, State and Federal audits are completed, whichever is later. Program data shall be retained locally (in the County) and made available upon request or turned over to County. If said records are not made available at the scheduled monitoring visit, Contractor may, at County's option, be required to reimburse County for expenses incurred due to required rescheduling of monitoring visit(s). Such reimbursement will not exceed \$50 per hour (including travel time) and be deducted from the following month's claim for reimbursement.

Records of the Contractor that do not pertain to the program shall not be subject to audit unless provided for in another agreement.

**ATTACHMENT A**

**COVER SHEET**

**PROPOSAL FOR DATA ENTRY SERVICES**

**PROPOSER'S NAME** (*name of firm, entity or organization*):

**FEDERAL EMPLOYER IDENTIFICATION NUMBER:**

**NAME AND TITLE OF PROPOSER'S CONTACT PERSON:**

**MAILING ADDRESS:**

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**FAX NUMBER:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**PROPOSER'S ORGANIZATIONAL STRUCTURE**

☐ Corporation    ☐ Partnership    ☐ Proprietorship    ☐ Joint Venture

☐ Other (explain): \_\_\_\_\_

If Corporation,    Date Incorporate: \_\_\_\_\_ State Incorporated: \_\_\_\_\_

States Registered in as foreign corporation:



## **CERTIFICATION**

THE UNDERSIGNED CERTIFIES AND AGREES ON BEHALF OF THE PROPOSER THAT:

1. All declarations in this proposal and attachments are true and the falsity of such representations entitles the County to pursue any legal remedy.
2. All aspects of this proposal, including cost, have been determined independently, without consultation with any other prospective Proposer or competitor for the purpose of restricting competition.
3. The offer made in this proposal is firm and binding for 180 days from the date the proposal is opened and recorded.
4. Any additional information the County deems necessary to accurately determine the ability to perform the services proposed will be provided immediately. Furthermore, submission of this proposal constitutes permission by the Proposer for the County to verify all information contained herein. Failure to comply with any request for additional information may disqualify the Proposer from further consideration. Such additional information may include evidence of financial ability to perform.
5. The undersigned has the authority to submit the proposal on behalf of the Proposer.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

**ATTACHMENT B**

**REFERENCES**

Name of Agency	Contact Name	Phone Number	Dates Services Provided (from/through)

**ATTACHMENT C**

**COST SUMMARY**

**INFORMATION SERVICES DEPARTMENT**

**DATA ENTRY SERVICES**

**RFP 03-04**

<u>DEPT./JOB</u>	<u>NUMBER OF RECORDS</u>	<u>COST PER RECORD</u> <i>(all inclusive)</i>
<b>Public Works – Trans / Flood Control / Surveyor:</b>		
HI015 – TCD INV SURVEY DOCUMENT	1,500-2,500 records monthly	
PP200 – Classification File Updates	1,500-2,500 records monthly	
PP300 – Department File Update	200-400 records per month	
PP400 – Personnel File Update	200-400 records per month	
PW925 – Surveyors Index	300-450 records per month	
PW949 – Surveyors Index Headers	50 records per month	
Motor Pool Headers	50 records per month	
Heavy Equip	50 records per month	
PW960 – Weekly Labor Reports	16,000-17,500 records per month	
PW965 – Motor Pool Equip	2,500-3,500 records per month	
PW970 – Regular Equip	4,000-4,500 records per month	
PW990 – Road Material (Stock Purchase Pickup Order)	1,500-2,000 records per month	
<b>Regional Parks:</b>		
RG200 – Comm Cult Res Cost Ctr Request for Transfers	25-50 records per month	
<b>ACR – Payroll:</b>		
HPCAP – COUNTY PAYROLL <i>See Attachment D for current record layout and description</i>	150,000-250,000 records monthly	
HPPUIC – UNEMPLOYMENT INSURANCE CLAIMS	400-500 records quarterly	

<u>DEPT./JOB</u>	<u>NUMBER OF RECORDS</u>	<u>COST PER RECORD</u> <i>(all inclusive)</i>
<b>Motorpool:</b>		
MP700 – SHERIFF MASTER UPDATE LIST	180-200 records every 2 months	
MONTHLY MILEAGE REPORT	180-200 records every 2 months	
PW900 – Motor Pool – Dorothy 387-7853	2,000-2,500 records per month	
PW905 – Cost Center Updates, Cost Center Transfers	750-800 records per month	
<b>Public Health:</b>		
PH400 – DEATH CERTIFICATES	2,500-3,500 per month	
<b>Assessor:</b>		
PSSUB – (NPP875) Subdivision Index – Assessor (once a year)	1,200-1,500 records per year	
<b>Facilities Mgt:</b>		
RP240 – Utility Bills – Facilities Mgmt	1,100-1,500 records per month	
RP260 – Utility Billing Company	25-50 records per month	
RP508 – Facility Management – Mgmt Material, Equipments, Labor	2,500-3,000 records per month	
<b>HSS:</b>		
WDUP1 – Welfare <i>See Attachment D for current record and layout description</i>	985,000-1,500,000 records per month	
WDMSW – DPSS Monthly Suspended Warrants	500-650 records monthly	
WTPUP – 278 Welfare Training Documents  <i>This job is done on request – usually quarterly. This job has not been completed for one year – Program will commence soon</i>	5,800-6,000 records per year	
<b>Tax Collector:</b>		
TRCAP – Tax Office – TR804 Party of Interest	15,000-20,000 per year – one time	
TR910 Returned Tax Bills	25,000- 30,000 records quarterly	
TZCAP – Treasurer	4,000-5,000 records per month	

## ATTACHMENT D

[illegible]

**ATTACHMENT D**

TITLE: TIME and LABOR (T & L's)      DATE: 07-23-02  
CUSTOMER NUMBER: 3235      PAGE: 1 of 4  
JOB ID: HPCAP      APPLICATION: HPCAPR  
      MASK: HPCAP

COLUMNS	DESCRIPTION
	<u>F1 - CHAINED TO F2</u>
	<u>FILE HEADER - Must have this record</u>
1	VALIDATION CODE - 'H' - Inserted
10-17	GENERATION DATE - MMDUCCYY - Inserted from the P/C (not shown)
19-24	GENERATION TIME - HHMMSS - Inserted (not shown)
34	DATE FLAG - 'L' - Inserted
73-77	BATCH ID/DEPT - Must Have
	<b>F1 - FILE HEADER RECORD</b>
	<b>F2 - EMPLOYEE DETAIL RECORD - OPEN</b>
	<b>F3 - DUPS CONTROL FIELDS, OPEN TO KEY WEEK, DAY, TYPE AND NO. OF UNITS</b>
	<b>F4 - DUPS CONTROL FIELDS, OPEN TO KEY ALL OTHER FIELDS</b>
	<b>F5 - EMPLOYEE SUMMARY RECORD</b>
	<b>F6 - FILE SUMMARY RECORD</b>

**ATTACHMENT D**

TITLE: TIME AND LABOR (T & L's)      DATE: 07-23-02  
CUSTOMER NUMBER: 3235      PAGE: 2 of 4  
JOB ID: HPCAP      APPLICATION: HPCAPR  
      MASK: HPCAP

COLUMNS	DESCRIPTION
F2 - Key a record for all entries that show <u>No. of Units.</u>	
<u>TIME AND LABOR RECORDS</u>	
1	RECORD TYPE 'D' - Inserted (not shown)
2-6	EMPLOYEE ID - Must have - Precede with zeros
12-14	RECD# - Must have - <u>Zero if none</u>
15-22	POSITION # - Must have - Precede with zeros
23-30	PAY END DATE -   - CCYYMMDD (Key as shown - MMDDCCYY Dups thru whole batch
31	WK - Must have - Can only be '1' or '2' <u>Tab Stop</u>
32	DAY -   Can only be 1 through 8
33-37	TRC TYPE - Must have. Must be a valid code
38-45	NO. OF UNITS -   XXXXXX.XX <b>DO NOT KEY DECIMAL</b> Key <u>0</u> or <u>blank</u> units as <u>zeros</u>
46-50	DEPT ID - Key as shown. Skip if blank.
51-54	PROGRAM -     Do not precede with zeros. Key as shown. If zeros shown, key. Otherwise key entry with spaces following.
55-58	ACTIVITY -
59-62	LOCATION -     Do not precede with zeros. Key as shown. If zeros shown, key. Otherwise key entry with spaces following.
63-67	COST CENTER -
68-72	GLOBAL -
73-77	BATCH ID/DEPARTMENT - <u>Must have</u>
NOTES: 1. DO not key entries that have been lined out. 2. KEY TERMINATIONS WITH ZERO UNITS!	

**ATTACHMENT D**

TITLE: TIME AND LABOR (T & L's)      DATE: 07-23-02  
CUSTOMER NUMBER: 3235      PAGE: 3 of 4  
JOB ID: HPCAP      APPLICATION: HPCAPR  
      MASK: HPCAP

COLUMNS	DESCRIPTION
	<u>F3</u> Key a record for all entries that show <u>units</u> . Same as <u>F2</u> except <u>Dups Control fields</u> and <u>open to key Wk, Day, TRC Type and No. of Units.</u>
	<u>F4</u> Key a record for all entries that show <u>units</u> . Same as <u>F2</u> except <u>Dups Control fields.</u>
	<u>F5</u> Chains to <u>F2</u>
	<u>EMPLOYEE SUMMARY RECORD</u>
1	RECORD TYPE - 'E' - Inserts
2-6	EMPLOYEE ID - <u>Must have</u> - Precede with zeros - Dups
12-14	RECD# - <u>Must have.</u> - <u>Zero if none</u> - Dups
38-45	TOTAL UNITS -   - XXXXXX.XX DO NOT KEY DECIMAL
73-77	BATCH ID/DEPARTMENT - <u>Must have</u> - Dups



**ATTACHMENT D**

DATE: 07-23-02  
TITLE: TIME AND LABOR (T & L's) PAGE: 4 OF 4  
CUSTOMER NUMBER: 3235 APPLICATION: HPCAPR  
JOB ID: HPCAP MASK: HPCAP

COLUMNS	DESCRIPTION
	P6 This record is keyed only once as the last record of the batch
	<u>FILE SUMMARY RECORD</u>
1	RECORD TYPE 'S' - Inserted (not shown)
10-15	RECORD COUNT - <u>Must have.</u> - Key total records from batch before closing

**ATTACHMENT D**

The form is a detailed data entry template. At the top, there is a header section with fields for 'Project Name', 'Project Number', 'Project Manager', and 'Project Start Date'. Below this is a large table with multiple columns and rows, likely for data entry. The table has several sections, some with headers like 'Project Description', 'Project Status', 'Project Budget', and 'Project Timeline'. The form also includes various checkboxes, radio buttons, and text input fields. The overall layout is dense and structured for data collection.

**ATTACHMENT D**

DATE: 11-09-01  
TITLE: WELFARE PAGE: 1 of 17  
CUSTOMER NUMBER: 5232 APPLICATION: WELFARE  
JOB ID: WDUP1 MASK: WDUP

<u>COLUMNS</u>	<u>DESCRIPTION</u>
<u>F1</u>	
	<u>CONTROL RECORD</u> - ALL WELFARE BATCHES WITH CONTROL SHEET "MUST HAVE" THIS RECORD
1-4	RECORD CODE 'W300' - Inserted
5-7	BATCH NUMBER - <u>Must have</u> . Precede with zeros
8-10	NUMBER ATPS - Precede with zeros. Zero if none.
11-13	NUMBER OF DOCUMENTS - Precede with zeros. Zero if none.
14-21	COUPON VALUE - Dollars and cents. Precede with zeros. Zero if none.
22-23	CATEGORY - 01-99 - Skip if blank.
24-26	NUMBER OF SUPPLEMENTALS - Precede with zeros. Zero if none.
27-34	CASH VALUE - Dollars and cents. Precede with zeros. Zero if none.

**ATTACHMENT D**

DATE: 11-09-01  
PAGE: 2 of 17  
TITLE: WELFARE  
APPLICATION: WELFARE  
CUSTOMER NUMBER: 5232  
MASK: WDUP  
JOB ID: WDUP1

COLUMNS	DESCRIPTION
	<u>F2 - CHAINED TO F3</u> <u>02 RECORD - MUST HAVE THIS RECORD</u>
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '02'
5	AC - Key as shown. Numeric or alpha. Skip if blank.
6-7	CAT - <u>Must have</u> . Key as shown
8-14	CASE NO - <u>Must have</u> . Precede with zeros
15	SUB - Must key if shown (machine-done or handwritten) Skip if blank, zero or * shown.
16-20	FILE NO/DISTRICT WORKER - Key as shown. Skip is blank
21	CASE TYPE - <u>Key as shown</u> . Skip if blank. <u>Numeric or alpha</u>
22-26	FILE NO ALT WORKER - <u>Key as shown</u> .
27	G - PI Can be Alpha or Numeric <u>Key as shown</u>
31-36	PROG SPEC DATE - <u>Precede month or day with zero.</u> <u>Skip if blank.</u>
43-44	TRF CAT - Key as shown. Skip if blank <u>TAB STOP</u>
78-80	BATCH NUMBER - <u>Must have</u> Precede with zero. <u>DUPS</u> Key from control document/batch ticket. <u>TAB STOP</u>

**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1

DATE: 11-09-01  
PAGE: 3 of 17  
APPLICATION: WELFARE  
MASK: WDUP

<u>COLUMNS</u>	<u>DESCRIPTION</u>
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NOTES:

1. Key only the handwritten information, as shown, on all levels. Ignore the machine-done except for the category, case and sub.
2. Cols 1-4, 6-14 and 15 if shown, are required on all levels.
3. If an \* shown in any field, always key the \* in the first position of the field on all records.
4. If 2 sheets are stapled together at the top anywhere, key second sheet. DO NOT key the 02 and 03 records on 2nd sheet unless the cat., sub number or case number are different from the 1st sheet. Do key the other records shown. If stapled top and bottom, do not key second sheet.
5. Any field crossed out in red skip the field.
6. DO NOT KEY ANYTHING ABOVE THE BLUE LINE ON ANY RECORDS.
7. When data cannot be read because of a date stamp or tear leave a note and skip field.

**ATTACHMENT D**

DATE: 11-09-01  
PAGE: 4 of 17  
APPLICATION: WELFARE  
MASK: WDUP

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUPL

COLUMNS	DESCRIPTION
<u>03 RECORD - MUST HAVE THIS RECORD</u>	
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '03'
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16-17	CASE BUDGETING <u>REASON</u> - Precede with zero. Skip if blank
18-23	<u>EFF-DATE</u> - <u>MMDYY. Precede month or day with zero.</u> <u>Skip if blank</u>
24-29	<u>APP-DATE</u> - <u>MMDYY.</u>
36	FOOD STAMPS-A/C - Key as shown. Numeric or alpha. Skip if blank. <u>TAB STOP</u>
37-38	<u>-REASON</u> - Precede with zero. Skip if blank.
39-44	<u>-EFF-DATE</u> - <u>MMDYY. Precede month or day with zero.</u> <u>Skip if blank.</u>
52	S1 - Key as shown. Alpha or numeric. Skip if blank
53-60	FC GROUP HOME - Key as shown. Numeric or alpha. Skip if blank. Ignore periods, if shown. Must have 8 digits. <u>TAB STOP</u>
78-80	BATCH NUMBER - <u>DUPS</u>

ATTACHMENT D

DATE: 11-09-01  
PAGE: 5 of 17  
APPLICATION: WELFARE  
MASK: WDUP

TITLE: WELFARE  
CUSTOMER NUMBER: 5212  
JOB ID: WDUP1

COLUMNS	DESCRIPTION
	<u>F3 - CHAINED TO P4</u> <u>12 RECORD</u>
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '12' - If a 13 record is keyed, <u>Must have</u> a 12 record.
5	AC - Skip.
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16	GR - <u>Key as shown. Skip if blank. Numeric or alpha</u>
17	STAT-
18	CT -   Alpha or Numeric
19	EO -   <u>Numeric or alpha</u>
20	PL -
21	CCI -
22-23	TRF COUNTY -
24	ABD -   <u>Alpha or Numeric</u>
25-28	RV DATE - MMY. Precede month with zero. Skip if blank <u>TAB STOP</u>
29-31	FC - <u>Skip if blank</u> Numeric or alpha
32-33	PAC -   <u>Alpha or numeric</u>
34	SOC -
35-36	<u>XREF-CASE-ID-1</u> CAT - Key as shown. Skip if blank. <u>TAB STOP</u>
37-43	- CASE NO - Precede with zeros. Skip if blank
44	- SUB - Skip if blank, * or zero shown. Alpha/Numeric
45-46	<u>XREF-CASE-ID-2</u> CAT - Key as shown. Skip if blank
47-53	- CASE NO - Precede with zeros. Skip if blank
54	- SUB - <u>Skip if blank, * or zero shown</u> Alpha/numeric
55	CHDP-MD <u>alpha</u> <u>TAB STOP</u>
56	CHDP-WFP   <u>numeric</u>
57	MM -   <u>numeric/alpha</u>
58	CC -
59	S7 -
78-80	BATCH NUMBER - <u>DUPS</u>



**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1  
DATE: 11-09-01  
PAGE: 6 of 17  
APPLICATION: WELFARE  
MASK: WDUP

COLUMNS	DESCRIPTION
<u>13 RECORD</u>	
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '13'- (Must key a 12 record if a 13 record is keyed)
5	AC - Skips.
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16	NMR - Key as shown. Skip if blank. Alpha or numeric.
17	SUS - Must be blank even if information shown.
18	STAT - <u>Key as shown. Skip if blank. Alpha or numeric.</u>
19	X -
20-23	CERTIFICATION-PERIOD-FROM - MMY. Precede month with zero. Skip if blank.
24-27	TO - MMY. Precede month with zero. Skip if blank.
28-33	FOOD-STAMP-APP-DATE - MMDDYY. Precede month or day with zero. Skip if blank.
34	SUP - Alpha/numeric
35	S9 - <u>Numeric or alpha. TAB STOP</u>
36	NOA -
37	CFAP IND -
38	WS -
39-40	S13 -
41-42	S14 -
43-45	AREA CODE - <u>Numeric. Key as shown. Skip if blank TAB STOP</u>
46-52	TELEPHONE NO -
78-80	BATCH NUMBER - <u>DUPS</u>



**ATTACHMENT D**

TITLE: WELFARE DATE: 11-09-01  
CUSTOMER NUMBER: 5232 PAGE: 7 of 17  
JOB ID: WDUP1 APPLICATION: WELFARE

MASK: WDUP

F4 - CHAINED TO P5  
32 RECORD

1-2 RECORD TYPE 'W3' - Inserted  
3-4 RECORD CODE '32'- (Must key a 32 record if a 33 record keyed)  
5 AC - Skip.  
6-7 CAT - DUPS  
8-14 CASE NO - |  
15 SUB - |  
16 AT ☒ Alpha-numeric Goes in both 32 and 33 records.  
17 AU ☒ Alpha-numeric  
18-37 ADDRESS BLOCK 1 -(In care of, Apt,P.O. box,etc.) DO NOT KEY #SIGN  
IF % SHOWN KEY C/O.  
38-44 STREET NUMBER - Suffix with spaces. DO NOT KEY # SIGN. TAB STOP  
45-47 FRACTION - 1/2, etc. (set up alpha)  
48-49 DIR - N,S,E,W. Suffix with spaces  
50-65 STREET NAME - Key as shown. DO NOT KEY # SIGN. TAB STOP.  
66-69 STREET SUFFIX - Ave, Blvd, St, Dr, etc. Suffix with spaces.  
78-80 BATCH NUMBER - DUPS  
NOTE: DO NOT KEY ANY SPECIAL CHARACTERS IN ANY ADDRESS FIELDS  
EXCEPT SLASH (/) OR DASH (-) OR ASTERICK \*.  
EX: IF PO BOX #3241 shown key whole thing in ADDRESS BLK 1  
Do not key the # for PO BOX in another field.

**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1  
DATE: 11-09-01  
PAGE: 8 of 17  
APPLICATION: WELFARE  
MASK: WDUP

COLUMNS	DESCRIPTION
	<u>33 RECORD - MUST HAVE A 32 TO KEY A 33</u>
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '33'- (Must key a 33 record if a 32 record is keyed)
5	AC - Skips.
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16	AT -
17-32	CITY - Alpha. Aux Dup S = San Bernardino Aux Dup R = Rancho Cucamonga
33-34	STATE - Alpha. Key as shown.
35-39	ZIP - Numeric. Key as shown.
40-43	PLUS 4 - Skips for now.
78-80	BATCH NUMBER - <u>DUPS</u>

NOTE:

1. Spell cities correctly, if abbreviated or you are unsure of spelling, check with your supervisor.

**ATTACHMENT D**

DATE: 11-09-01

TITLE: WELFARE

PAGE: 9 of 17

CUSTOMER NUMBER: 5232

APPLICATION: WELFARE

JOB ID: WDUPL

MASK: WDUP

COLUMNS	DESCRIPTION
	<u>F5 - CHAINED TO F6</u> <u>22 RECORD</u>
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '22' - (Must key a 22 record if a 23 record keyed)
5	AC - Key as shown. Skip if blank. Numeric or alpha
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16-17	PN - Numeric or alpha. Precede with zeros. Skip if blank.
18	PT - Alpha. Skip if blank.
19-20	REASON - Numeric
21	ELIG - Alpha
22	CFAP/IND - <u>Alpha/Numeric</u>
23	CT -
24	PS-PT
25-34	FIRST NAME - DO NOT KEY APOSTROPHE IN NAME FIELD. <u>TAB STOP.</u>
35	MI
36-49	LAST NAME - DO NOT KEY APOSTROPHE IN NAME FIELD
50-52	NAME SUFFIX - Jr, Sr, III, etc.
53	SSVC - Numeric/Alpha - <u>TAB STOP</u>
54-62	SOCIAL SECURITY NUMBER - Skip if blank, incomplete, word "Pending" shown, too long or any alpha shown.
63	SEX - Alpha. Skip if blank <u>TAB STOP</u>
64-71	BIRTH DATE - MMDDCCYY. Skip if blank.
78-80	BATCH NUMBER - <u>DUPS</u>
	No dashes in 1 <sup>st</sup> name or last name field. No characters also. DO NOT KEY APOSTROPHE IN ANY NAME FIELD.

**ATTACHMENT D**

DATE: 11-09-01  
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CUSTOMER NUMBER: 5232  
APPLICATION: WELFARE  
JOB ID: WDUP1  
MASK: WDUP

COLUMNS	DESCRIPTION
<u>23 RECORD</u>	
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '23' - Must have a 22 record if a 23 record keyed)
5	AC - <u>DUPS</u>
6-7	CAT -
8-14	CASE NO -
15	SUB -
16-17	PN -
18	PT -
19-24	CASE BUDGETING-APP DATE - <u>MMDDYY.</u>
25-30	" - <u>EFF DATE</u> -
31-36	FOOD STAMP-EFF DATE -   <u>TAB STOP</u>
37-42	MBDI CAL - START -
43-48	- STOP -
49-50	TP/FE ☒ alpha-numeric - <u>TAB STOP</u> Key as shown
78-80	BATCH NUMBER - <u>DUPS</u>

**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1  
DATE: 11-09-01  
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MASK: WDUP

COLUMNS	DESCRIPTION
<u>F6</u> <u>24 RECORD</u>	
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '24'
5	AC - Numeric or alpha. Key as shown. Skip if blank.
6-7	CAT - <u>Must have.</u> <u>DUPS</u>
8-14	CASE NO - <u>Must have.</u>
15	SUB - Skip if blank or zero.
16-17	PN - Numeric/Alpha
18-26	SOCIAL SECURITY CLAIM NO - Skip if blank
27-29	SSCN SUFFIX - Alpha. Key as shown.
30	DC - Alpha
31	OC - Alpha. <u>TAB STOP</u>
32-33	MCAT ☒ Alpha-Numeric
34	MCS -
35	ALIEN -
36-37	WORK REG CODE ☒ Alpha- Numeric <u>TAB STOP</u>
38-41	ABAWD - MMY
42	A1 ☒ <u>Numeric/Alpha</u>
43	S2 -
44	QMB -
78-80	BATCH NUMBER - <u>DUPS</u>

**ATTACHMENT D**

DATE: 11-02-01  
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APPLICATION: WELFARE  
MASK: WDUP

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1

COLUMNS	DESCRIPTION
<u>F7</u> <u>42 RECORD</u>	
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '42'
5	AC - Alpha or Numeric. Key as shown. Skip if blank.
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16-18	BIC - Numeric
19-20	PN - Numeric or Alpha
22-25	START DATE - MMY -
26-29	STOP DATE - MMY - If all nines shown key 1249.
30-35	BALANCE OWING AMOUNT - Dollars and cents. Precede dollars with zeros. Zero cents if none. If an * shown, ignore.
36	2 - Alpha. Skip if blank.
37-42	2ND PRIOR AMOUNT - Dollars and cents. Precede dollars with zeros. Zero cents if none. If an * shown, ignore.
43	1 - Alpha. Skip if blank
44-49	1st PRIOR AMOUNT - <u>TAB</u> Dollars and cents. Precede dollars with zeros. Zero cents if none. If an * shown, ignore.
50	C - Alpha. Skip if blank.
51-56	CURRENT AMOUNT - Dollars and cents. Precede dollars with zeros. Zero cents if none. If an * shown, ignore.
57	F - Alpha. Skip if blank.
58-63	FUTURE AMOUNT - <u>TAB</u> Dollars and cents. Precede dollars with zeros. Zero cents if none. If an * shown, ignore.
78-80	BATCH NUMBER - <u>DUPS</u>

**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1

DATE: 11-09-01  
PAGE: 13 of 17  
APPLICATION: WELFARE  
MASK: WDUP

COLUMNS	DESCRIPTION
	<u>SFI</u>
	<u>14 RECORD</u>
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '14'
5	AC - Skip.
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16-19	MO YR - MMY
20-22	CODE - Precede with zeros
23-26	MO YR - MMY
27-29	CODE - Precede with zeros
30-33	MO YR - MMY
34-36	CODE - Precede with zeros
37-40	MO YR - MMY <u>TAB STOP</u>
41-43	CODE - Precede with zeros
78-80	BATCH NUMBER - <u>DUPS</u>

NOTES:

1. An \* can be shown in first position of month or year fields.  
Key in first position of month or year field as shown.

**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1

DATE: 11-09-01  
PAGE: 14 of 17  
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MASK: WDUP

COLUMNS	DESCRIPTION
	<u>SF2 CHAINED TO SF3</u> <u>44 RECORD</u>
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '44'
5	AC - Skip.
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16-19	DATE - MMY
20	A/U AD - <u>Numeric</u>
21-22	A/U EC -
23	FAMILY - AD
24-25	FAMILY - EC
26-27	HHS -
28	CASE TYPE - Key as shown
29-32	DATE - MMY - <u>TAB STOP</u>
33	A/U AD - <u>Numeric</u>
34-35	A/U EC -
36	FAMILY - AD
37-38	FAMILY - EC
39-40	HHS -
41	CASE TYPE - Key as shown



**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1

DATE: 11-09-01  
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MASK: WDUP

COLUMNS	DESCRIPTION
<u>44 RECORD CONTINUED</u>	
42-45	DATE - MMYT <u>TAB STOP</u>
46	A/U - AD <u>Numeric</u>
47-48	A/U - EC
49	FAMILY - AD
50-51	FAMILY - EC
52-53	HHS -
54	CASE TYPE -      Key as shown
55-58	DATE - MMYT <u>TAB STOP</u>
59	A/U - AD <u>Numeric</u>
60-61	A/U - EC
62	FAMILY - AD
63-64	FAMILY - EC <u>Numeric</u>
65-66	HHS -
67 -	CASE TYPE -      Key as shown
78-80	BATCH NUMBER - <u>DUPS</u>

**ATTACHMENT D**

DATE: 11-09-01  
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APPLICATION: WELFARE  
MASK: WDUP

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1

COLUMNS	DESCRIPTION
<u>F3</u> <u>52 RECORD</u>	
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '52'
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16	FED AD - <u>Numeric</u>
17-18	FED EC -
19	STATE/CO AD -
20-21	STATE/CO EC -
22-31	FIRST NAME - DO NOT KEY APOSTROPHE IN NAME FIELD. <u>TAB STOP</u>
32	MI
33-46	LAST NAME DO NOT KEY APOSTROPHE IN NAME FIELD.
47-52	AMOUNT - Precede with zeros <u>TAB STOP</u>
53-56	FOR MONTH - MMY
57-58	AID - Numeric - <i>alpha</i> <u>12/26/01</u>
59-60	PAC - <u>Alpha</u>
61-62	PAR -   <u>TAB STOP</u>
63	NA -
64-71	FC GROUP HOME - Key as shown. Numeric or alpha. Skip if blank. Ignore periods if shown. Must have 8 digits. <u>TAB</u>
78-80	BATCH NUMBER - <u>DUPS</u> Do not key dashes in 1 <sup>st</sup> name or last name field. No characters also. NOTE: DO NOT KEY APOSTROPHE IN NAME.

**ATTACHMENT D**

TITLE: WELFARE  
CUSTOMER NUMBER: 5232  
JOB ID: WDUP1  
DATE: 11-02-01  
PAGE: 17 of 17  
APPLICATION: WELFARE  
MASK: WDUP

COLUMNS	DESCRIPTION
	<u>F4</u> <u>62 RECORD</u>
1-2	RECORD TYPE 'W3' - Inserted
3-4	RECORD CODE '62'
6-7	CAT - <u>DUPS</u>
8-14	CASE NO -
15	SUB -
16	IT - Alpha
17-20	FOR MONTH - MMY
21-27	NET INCOME - Dollars and cents. Precede dollars with zeros. Zero cents if none. If * shown, ignore.
28-29	HHS - Numeric
30-36	STAMP VALUE - Dollars and cents. Precede dollars with zeros. Zero cents if none. If * shown, ignore.
37-38	PAR - Alpha
78-80	BATCH NUMBER - <u>DUPS</u>

*Key 1 character value in col 37' } 12/24/01  
Even if shown in col 38' } Submit  
Traces*